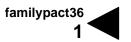
## Family PACT: Secondary Core Laboratory Codes – **Sexually Transmitted Infection (STI)**



This section identifies the procedure codes to be used for Family PACT Sexually Transmitted Infection (STI) treatment services described in the Family PACT: Billing Code List - Secondary Core Codes, Sexually Transmitted Infection (STI) [familypact20] section in this manual. These codes are billed with the appropriate secondary ICD-9-CM diagnosis, together with the appropriate (client's family planning method) Family PACT primary diagnosis "S" code.

## **Sexually Transmitted** Infections (STIs)

The Family PACT Program includes secondary core services for the diagnosis and treatment of Sexually Transmitted Infections (STIs) as related to reproductive health conditions, in addition to those available with method-specific services. Reimbursement is limited to procedures selected by the program for each specific STI diagnosis.

Method-Specific Services Include Pre-Selected STI and UTI Testing

Each "S" code primary core service includes a pre-selected array of basic STI and Urinary Tract Infection (UTI) laboratory services for screening asymptomatic and symptomatic clients. Family PACT testing procedures are to be used as indicated by clinical assessment of an individual client's risk and need. Documentation showing medical justification for the necessity of laboratory screening and testing is required.

Refer to the Family PACT: Primary Core Laboratory Codes – Family Planning Method [familypact35] section in this manual for a list of pre-selected Family PACT procedure codes.

## Chlamydia (0994 - 09959)

Bill with secondary diagnosis ICD-9-CM codes 0994 - 09959.

Chlamydia core procedures are billed with the following CPT-4 or HCPCS procedure codes.

Procedures	HCPCS Code	<u>Description</u>
	Z5218	Collection and handling of blood specimen (when only service rendered)
	Z5220	Collection and handling of blood specimen (when other services rendered)
Laboratory	CPT-4 Code	<u>Description</u>
	87205	Gram stain

Syphilis (0910 – 0979)	Bill with secondary diagnosis ICD-9-CM codes 0910 – 0979.		
(6516 6515)	Syphilis core procedures are billed with the following CPT-4 or HCPCS procedure codes.		
Procedures	HCPCS Code	Description	
	Z5218	Collection and handling of blood specimen (when only service rendered)	
	Z5220	Collection and handling of blood specimen (when other services rendered)	
Laboratory	CPT-4 <u>Code</u>	Description	
	86593 86781 87164 87166	Syphilis test, quantitative FTA-abs Dark field examination Dark field examination, without collection	
Gonorrhea (0980 – 09889)	Bill with secondary diagnosis ICD-9-CM codes 0980 – 09889.		
	Gonorrhea core procedures are billed with the following CPT-4 or HCPCS procedure codes.		
Procedures	HCPCS Code	<u>Description</u>	
	Z5218	Collection and handling of blood specimen (when only service rendered)	
	Z5220	Collection and handling of blood specimen (when other services rendered)	
Laboratory	CPT-4 <u>Code</u>	Description	

Gram stain

87205

Pelvic Inflammatory Disease (PID) – Outpatient Only (6140 – 6149) (Females Only) Bill with secondary diagnosis ICD-9-CM codes 6140 – 6149.

PID core procedures are billed with the following CPT-4 or HCPCS procedure codes.

Procedures	HCPCS Code	<u>Description</u>
	Z5218	Collection and handling of blood specimen (when only service rendered)
	Z5220	Collection and handling of blood specimen (when other services rendered)
Laboratory	CPT-4	
•	<u>Code</u>	<u>Description</u>
	85007	Blood count, manual with differential
	85008	Manual blood smear with differential parameters
	85021	Hemogram, automated
	85022	Hemogram, automated with manual differential
	85023	Hemogram and platelet count, automated with manual differential
	85024	Hemogram and platelet count, automated and automated partial differential
	85025	Hemogram and platelet count, automated and automated complete differential
	85027	Hemogram and platelet count, automated
	85031	Hemogram, manual
	85651	Sedimentation rate
	85652	Sedimentation rate automated
	87110	Chlamydia culture. Test can be used as a screen in asymptomatic individuals or as a diagnostic test when symptomatic.
	87205	Gram stain

Vaginitis/Vaginal Discharge
(1121, 13100 – 13109,
6160 – 6169)

Bill with secondary diagnosis ICD-9-CM code 1121, 13100 – 13109

or 6160 - 6169.

Vaginitis/vaginal discharge core procedures are billed with the

following CPT-4 or HCPCS procedure codes.

Procedures HCPCS

<u>Code</u> <u>Description</u>

Z5218 Collection and handling of blood specimen (when only

service rendered)

Z5220 Collection and handling of blood specimen (when

other services rendered)

Laboratory CPT-4

Code Description

83986 pH determination 87205 Gram stain 87210 Wet mount

**Genital Herpes** (05410 – 05419)

Bill with secondary diagnosis ICD-9-CM codes 05410 – 05419.

Genital herpes core procedures are billed with the following CPT-4 or

HCPCS procedure codes.

Procedures HCPCS

Code Description

Z5218 Collection and handling of blood specimen (when only

service rendered)

Z5220 Collection and handling of blood specimen (when

other services rendered)

Laboratory CPT-4

<u>Code</u> <u>Description</u>

87207 Smear, special stain

87252 Virus identification, tissue culture

87274 Herpes DFA

Genital Warts (0780 – 07819)	Bill with secondary diagnosis ICD-9-CM codes 0780 – 07819.		
	Genital warts core procedures are billed with the following CPT-4 or HCPCS procedure codes.		
Procedures	CPT-4 <u>Code</u>	<u>Description</u>	
	54050 54056 54100 56501 57061 57500	Destruction of lesion(s), penis; simple chemical Destruction of lesion(s), penis; cryosurgery Biopsy of penis, cutaneous Destruction of lesion(s), vulva; simple Destruction of vaginal lesion(s); simple Biopsy, single or multiple, or local excision of lesion; only to confirm vulva, vaginal, or genital warts in wart treatment candidate	
Laboratory	CPT-4 <u>Code</u>	<u>Description</u>	
	88304	Surgical pathology, Level III	